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APPLICANTS

Richard A. Pineau, No. Andover, MA;
Sandra B. Lawrence, Brookline, MA;

**** CONTINUING DATA *******

THIS APPLICATION IS A CIP OF 09/870,538 05/30/2001

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Orlando Lopez
POLAROID CORPORATION
Patent Department
784 Memorial Drive
Cambridge, MA 02139

TITLE

Method and apparatus for printing remote images using a network-enabled printer

FILING FEE RECEIVED 1190	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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